



PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective December 29, 1999

675451

MULTIPLE DEPENDENT CLAIM PRESENT *If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **COLUMN 1 **CLAIMS REMAINING REMAINING PARCHOLIST PREVIOUSLY PARCHOLIST PREVIOUSLY PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM **Total		CL		SMALL E	NTITY		OTHER	THAN			
BASIC FEE							TYPE [OR	SMALL	ENTITY
TOTAL CLAIMS	FC	R	NUMBER FII	LED	NUMBER E	XTRA	RATE	FEE		RATE	FEE
NOBPENDENT CLAIMS	ВА	SIC FEE						345.00	OR		690.00
NOBPENDENT CLAIMS	TOTAL CLAIMS 46 minus 20			minus 20=			X\$ 9=		OR	X\$18=	468.°
11 the difference in column 1 is less than zero, enter "0" in column 2	INDEPENDENT CLAIMS 5 minus 3 = + 2						X39=		OR	X78=	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) REMAINING REMAINING REMAINING REMAINING REPORT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM COLUMN 1) (Column 2) (Column 3) CLAIMS REMAINING R	MU	LTIPLE DEPENDENT	+130=		OR	+260=					
CColumn 1)	* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	1314 ⁰⁰
REMAINING PRESENT PRESENT PRESENT Total							SMALL E	NTITY	OR		THAN
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	AMENDMENT A	N RE	MAINING I	PI	NUMBER REVIOUSLY		RATE	TIONAL		RATE	TIONAL
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total •	Minu Minu	is **	46	=	X\$ 9=		OR	X\$18=	
130					<u> </u>	=	X39=		OR	X78=	
Column 1)		FIRST PRESENTAL	ON OF WIDETIF	CC DCF CIVI	DENT CEATIVI		+130=		OR	+260=	
COlumn 1) COlumn 2) COlumn 3) RATE ADDI- TIONAL FEE AMENIANDA AFTER AMENIAND AFTER AMENIAND AFTER AMENIAND FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM FEE ADDI- TIONAL FEE AMENIAND FEE ADDI- TIONAL ADDIT. FEE ADDI- TIONAL						,	TOTAL		OR		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= OR TOTAL ADDIT. FEE OR TOTAL ADIT. FEE OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE OR TOTAL AD		Total •	to Minu	ıs **	4φ	= (X\$ 9=		OR	X\$18=	
Hand Column 1 Column 2 Column 3	AME				<u> </u>)	X39=		OR	X78=	
Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OH ADDIT. FEE ADDIT. FEE ADDIT. FEE OH ADDIT. FEE ADDIT. FEE OH ADIT. FEE OH ADDIT. FEE	-	FIRST PRESENTAL	ION OF MOLTIF	LE DEFEN	DENT CLAIM		+130=		OR	+260=	
Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR Total									OR		
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA Total • Minus • =		(Ce	olumn 1)	((Column 2)	(Column 3)	ADDIT. PEE				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."		RE	LAIMS MAINING AFTER	Pozidi (HIGHEST NUMBER REVIOUSLY	PRESENT	RATE	TIONAL		RATE	TIONAL
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	N N	Total +	Minu	us **		=	X\$ 9=		OR	X\$18=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	AME					<u> </u>	X39=		OR	X78=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	F	FIRST PRESENTAT	ION OF MULTIF	PLE DEPEN	DENT CLAIM		+130=			+260=	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL		OB.		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.		If the "Highest Number	Previously Paid Fo	or" IN THIS SP	PACE is less tha	an 3, enter "3."		propriate bo	,		